# University of Arizona College of Medicine – Phoenix Department of Internal Medicine Strategic Plan 2021-2025

The UACOMP Department of Internal Medicine is embarking on our next era of strategic planning and growth in the areas of clinical collaboration, advancement in research, and excellence in training. Each of these academic missions will utilize a framework that focuses on our values and goals, in close alignment with our institutional stakeholders, in order to innovate, investigate, and lead health care across the state and nation.

The missions of an academic medical center must continue to evolve and improve. Our strategic plan is designed on our strengths and values to achieve these goals.

Figure 1. Strategic pillars for advancement of UACOMP Department of Internal Medicine academic missions



## **Clinical Collaboration**

# Aim: to create multidisciplinary teams that innovate and improve care to serve our community

## **Innovative Projects and Programs**

- 1. Identify and implement 3-5 priority focus areas for multidisciplinary collaboration and pilot programs examples include IM-surg, IM-MDA, IM-ortho, obesity/endo/genomics
  - a. Survey division leaders, training program directors, extradepartmental leaders, VA leaders, and community partners to identify opportunities for improvement and collaboration in clinical care Suggested ideas to date include:
    - i. Cardiovascular disease
    - ii. Metabolic health
    - iii. Inflammation and fibrosis
    - iv. Special populations/health equity
  - b. Embed interprofessional teamwork
  - c. Incorporate innovative collaborations with
    - i. Implementation science
    - ii. Engineering/technology/informatics
    - iii. Healthcare tech/venture connectors
- 2. Establish relevant leadership teams for each of the focus areas

## **Programmatic Infrastructure**

- 1. Determine metrics for success and accountability
  - a. Train division chiefs in Vizient
  - b. Connect to **departmental dashboard**
  - c. Leaders for clinical integrity (satisfaction, documentation, RVU).

    Partner with revenue integrity, clin documentation, practice admin, etc.
- 2. Gather support team for assistance (grant writing, IRB, statistical support, manuscript writing)

## Career Development and Improvement

- 1. Support culture of collaboration across the department
- 2. Create and communicate robust mentorship and faculty development opportunities
- 3. Champion diversity, equity and inclusivity efforts through broad leadership and integrated programming

#### Climate and Culture

- 1. Recruit strategically with preemptive retention efforts
- 2. Regular, meaningful meetings that include recognition of departmental contributions

#### Metrics will include:

- New clinical centers in 3 collaborative areas with interprofessional teams
- Clinical growth in patient volume DOM
- Functional and valuable departmental dashboard

## **Advancing Research**

Aim: To advance key areas of translational research through optimization of teams that will solve critical problems affecting our community and society

## **Innovative Projects and Programs**

- 1. Identify 3-5 priority areas of collaborative study with implementation plans
  - Link to clinical collaborative multidisciplinary teams. Suggested areas of focus to date (based on work already initiated in these areas) include:
    - i. Cardiovascular disease
    - ii. Metabolic health
    - iii. Inflammation and fibrosis
    - iv. Special populations/health equity
    - v. Drug development
    - vi. Links to Center For Advanced Molecular Immunology (CAMI)

## **Programmatic Infrastructure**

- 1. Develop research review team comprised of clinical and translational leaders to create structure, process and communication plan for support to move research forward
- 2. Determine accountability metrics for catalyst funding:
  - Bi-annual review of project progress including publications and grant submissions (total and funded)
  - Annual presentation of data to the Department and BUMG leadership (research symposium)
- 3. Gather support team for assistance (grant writing, IRB, statistical support, manuscript writing, submission fees)
  - Could also include travel funds, innovative small funding opportunities

## Career Development and Improvement

- 1. Determine need and process to apply tiered research catalyst funds to projects that align with strategic plans of our institutions and department
  - Tier 1: Small research/data projects (6-12 month) that will catalyze novel ideas to challenge and evolve existing clinical/translational paradigms
    - 3-5 per year, \$10K per project

- Tier 2: Research Projects (1-year) early phase research targeting junior faculty collaborating with established clinical/translational investigators to create preliminary data to obtain/sustain grant funding
  - 2-3 per year, \$50K per project
- Tier 3 Projects (2-year) Collaborative junior and/or established investigators who have significant data accumulated to then approach high-level federal or foundation funding.
  - 1 per year, \$120k per project
- 2. Facilitate research mentorship and skill-building using DOM Program to Education and Evolve Research (PEER). Additional ideas include:
  - Education using research one-pager
  - o Expand residency research mentorship panel
  - o Regular research meetings
  - Regular opportunities for clinicians and translational researchers to connect

#### Climate and Culture

1. Advance research culture across the department through targeted hiring, mentorship

#### Metrics will include:

- Grant funding for research projects
- Active research in at least 3 collaborative areas at all three funding tiers
- Number of active/completed research projects in DOM
- Number of funded investigators
- Peer-reviewed publications in the department

## **Excellence in Training**

Aim: To evolve and innovate training to best prepare learners of all levels and perspectives to meet new challenges and needs of the future of health care

## **Innovative Projects and Programs**

- 1. Identify 3-5 priority areas within medical education, faculty development, and EDI with implementation plans
  - a. Medical Education
    - i. Primary care
      - 1. Uniquely position residents and faculty to connect to other strategic specialty areas

- ii. Transitions (peds-adult)
  - 1. Focused training at GME level in clinical conditions affecting adults diagnosed as children
- iii. Interprofessional team education and clinical care
  - 1. RN navigator
  - 2. Clinic HOUSE structure MD/DO, RN, RD, PT, PharmD
- iv. Advance innovative UME-GME-GME transition and personalized training
  - 1. Collaborate with UACOMP Director of UME-GME transition
  - 2. Explore innovative scheduling and rotations to maximize learner experience
  - 3. Create DOM time-variable competency-based med ed model and pilot
- b. Faculty development
  - i. Career track development across divisions
  - ii. Promotion
  - iii. Optimal learning environments

## **Programmatic Infrastructure**

- 1. Create leadership committees for Education, Faculty development, and EDI to implement the above, that incorporates faculty across clinical sites affiliated with UACOMP
- 2. Gather support team for assistance with preparing grant proposals for med education and new training programs (same language as the others). Examples:
  - a. Med ed research
  - b. Non-ACGME fellowship funding
  - c. Other grant funding
- 3. Determine need and process to apply medical education research catalyst funds
  - a. Leadership committee to create, process will mirror research funding mechanisms in other domains

## Career Development and Improvement

- 1. Empower diversity champions across the department under Vice Chair of Equity, Diversity and Inclusion to foster mentorship and pipeline creation
  - a. Coordinate efforts with GME Chair of EDI, OEDI, other departments
  - b. Community college partnerships for health sciences and other pipeline efforts

## Climate and Culture

- 1. Create culture (and sponsorship) of leadership development (not just roles)
  - a. FLC/mentorship programs
  - b. Pathway programs
  - c. Education scholars
  - d. Search committee recruitment?

e. Targeted inclusive hiring of current/future faculty from historically underrepresented backgrounds with expertise in research, med ed

#### Metrics will include:

- Active projects in 3 new areas of medical education at all levels
- Pilot time-variable competency-based medical education UME-GME transition
- Number of faculty actively engaged in leadership and other professional development activities (as measured in dashboard and UAVitae or equivalent)
- Retention rates of housestaff and faculty

## **Enhanced communication**

## Aim: To support and facilitate all departmental missions

The department recognizes that an additional focus on communication and transparency is necessary at the departmental level in order to support the above specific mission-based components of the strategic plan.

- 1. Build effective communications team
  - a. Hire communications communications/marketing specialist
  - b. Establish team using existing staff and faculty
  - c. Collaborate with stakeholder marketing experts to establish networking/marketing structure
    - i. Internal DOM/interdepartmental/GME programs
    - External Marketing individual expertise across department as well as interdisciplinary programs and projects to community and beyond
  - d. Reputation management
- 2. Highlight and clarify departmental activities through all DOM communications
  - a. Regular departmental meetings
  - b. Creating opportunities for recognition, including annual awards
  - c. Quarterly DOM newsletters
  - d. reIMAGINE Medicine annual publication
  - e. Website and social media
  - f. Enhanced experience of onboarding and first six months of employment
- 3. Implement mechanism for feedback on academic performance
  - a. Review and update dashboard elements annually
  - b. Develop plan for effective dissemination
- 4. Prioritize interprofessional communication and peer support
  - a. Collaborate with interested faculty from other departments

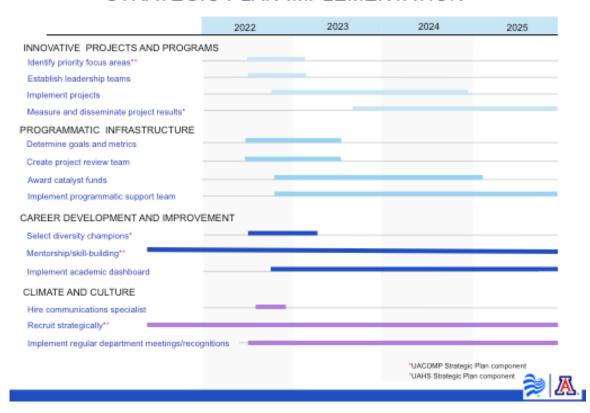
- b. Evaluate and make recommendations on programs for communication feedback and simulation
- c. Participate in programs sponsored by institution ie. CANDOR, Talk2Me

## Metrics will include:

- Department meetings at least twice per year with annual recognitions
- Number of incident reports of professionalism lapses by students and housestaff
- Faculty satisfaction with communication

Figure 2. Strategic Plan Implementation Timeline

## STRATEGIC PLAN IMPLEMENTATION



## **Relevant Stakeholders**

### **UAHS** strategic plan

- Next gen education (customized, IPE)
- Precision medicine (pain, addiction)
- Innovations in healthy aging
- Defenses against disease (cocci)
- New frontiers for better health (tech, telehealth)

## **UACOMP** strategic plan

- Innovative and personalized medical education
- Addressing physician shortage (grow GME programs)
- Distinction in research that improves health
- Inclusive excellence
- Collaborative clinical care
- Operational effectiveness and collaboration (tech, communication)

# Share your comments on the strategic plan below $% \left\{ \mathbf{r}^{\prime}\right\} =\mathbf{r}^{\prime}$

The comment period closed on July 15, 2022.

# **Strategic Plan Comment**

